

FIRST REGULAR SESSION

HOUSE BILL NO. 762

91ST GENERAL ASSEMBLY

INTRODUCED BY REPRESENTATIVES KREIDER, BARRY, RIBACK WILSON, FOLEY, CRUMP, ABEL, WILLIAMS, JOHNSON (61), KELLY (27), CAMPBELL, BOYKINS, WILSON (42), LADD BAKER, FRASER (Co-sponsors), THOMPSON, LOWE, GREEN (73), WALTON, COPENHAVER, HAYWOOD, OSTMANN, JOLLY, BRAY, FARNEN, LONG, MAYS (50), BARTELSMEYER, CIERPIOT, MOORE, ENZ, HOLLINGSWORTH, CURLS, PHILLIPS, JOHNSON (90), CARNAHAN, SMITH, BARNITZ, BOUCHER, HAGAN-HARRELL, WIGGINS, HOLT, SELBY, RELFORD, DAVIS, HILGEMANN, LAWSON, BERKSTRESSER, SANDERS BROOKS, HARDING AND REINHART.

Read 1st time February 13, 2001, and 1000 copies ordered printed.

TED WEDEL, Chief Clerk

1642L.04I

AN ACT

To amend chapter 354, RSMo, by adding thereto one new section relating to women's health services.

Be it enacted by the General Assembly of the state of Missouri, as follows:

Section A. Chapter 354, RSMo, is amended by adding thereto one new section, to be known as section 354.549, to read as follows:

354.549. 1. Each entity offering individual and group health insurance policies providing coverage on an expense-incurred basis, individual and group service or indemnity type contracts issued by a nonprofit corporation, individual and group service contracts issued by a health maintenance organization, all self-insured group arrangements to the extent not preempted by federal law, and all managed health care delivery entities of any type or description, that provide obstetrical/gynecological and pharmaceutical coverage, and which are delivered, issued for delivery, continued or renewed in this state on or after January 1, 2002, shall:

(1) Provide enrollees with direct access to the services of a participating obstetrician, participating gynecologist or participating obstetrician/gynecologist of her choice within the provider network; and

(2) Annually notify enrollees of the cancer screenings, such as pap tests and mammograms, that are covered by the enrollees' health care plans;

(3) Provide coverage for bone density testing for postmenopausal women; and

15 **(4) Offer contraceptive coverage to enrollees either at no charge or on a formulary.**
16 **If contraceptive coverage is provided on a formulary, such coverage shall not be subject**
17 **to any greater deductible or copayment than any other health care service provided by the**
18 **policy, contract or plan.**

19 **2. The provisions of this section shall not apply to a supplemental insurance policy,**
20 **including a life care contract, accident only policy, specified disease policy, hospital policy**
21 **providing a fixed daily benefit only, Medicare supplement policy or long-term care policy.**